Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (950)617-6383

Erom:

Account Name : ALVAREZ, SUAZO & ASSOCIATES

Account Number : I20130000076 Phone : (305)388-7028

Fax Number : (305) 479-2705

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALTA ALE INVESTMENT, LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

K.SALY EXAMINER JUN 23 2015

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2015 JUN 22 AM 9:21 TALLAHASSEE, FI MOSS

	ALTA ALE INVESTMENT, LLC	The FLORID.
(Name of the Lin	ited Liability Company as it new appears on our records (A Florida Limited Liability Company)	<u>.</u>
The Articles of Organization for this Limited	Liability Company were filed on 01/29/2014	and assigned
Florida document number £14000015979	•	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
N/A		
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	(Aphle)	
• • • • • • • • • • • • • • • • • • • •		
<u>Principal office address MUST BE A STRE</u>	ET ADDRESS)	
		- -
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	T ROY)	
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egistered agent and/or the new registered of	l'or registered office address on our records,	enter the name of the
Version of the second of the s	777700 0000, 000 11070	
Name of New Registered Agent;	N/A	
Name Banisana 1 Office A January		
New Registered Office Address:	Enter Florida street address	
	Approx 1 17, 166 Servers Baller 4,07	
	, Flo	
	Clty	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TIM SUAZO	13501 SW 128TH STREET	□ Add
		STE. 202	≅ Remove
		MIAMI, FL 33186	☐ Change
			□ Add
			□ Remove
			☐ Change
			Remove 1. Change 9: 2
			☐ Add 2
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			□ Add
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this milestrate more is impress nic cont	must be specific and cannot be prior to date of filing or more the s block does not meet the applicable statutory filing required.	ian 90 days after filing.) Pursuant to 605,020
ote: It tile oute moeried iff (ii)		reimpresento this days will mat he listed as

Page 3 of 3

Filing Fee: \$25.00